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Samuels, Gauthi Suite 3300 225 Franklin Stree	er & Stevens LLP	MAR 0	2 2005	I hereby certify that States Postal Service	ertificate of Mailing or Trans this Fee(s) Transmittal is being with sufficient postage for fi	nsmission ng deposited with the United rst class mail in an envelope s above, or being facsimile date indicated below.	
Boston, MA 02110)	MAR U					
03/03/2005 MWDLDGE2 00000059 09981021		C& TRAN	ENGARKS	Sarah E.	Kennedy	(Depositor's name) (Signature)	
01 FC:1501 02 FC:8001	1400.00 OP 9.00 OP			21	28/05	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED		D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/981,021	09/981,021 10/16/2001		Frederic Boutaud		ANALOG.6202	5638	
TITLE OF INVENTION: D	OATA SYNCHRONIZATIO	N ON A PERIPHE	RAL BUS				
Repln. Ref: 03/03/2005 M DA#:190079 Name/Number FC: 9204							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	nonprovisional NO)	\$0	\$1400	05/02/2005	
EXAMINÉR		ART UN	IT	CLASS-SUBCLASS			
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1. Change of correspondence CFR 1.363).	e address or indication of "F	ee Address" (37	-	ting on the patent front page,	(faiirn)	ier & Connors LL	
Change of correspond Address form PTO/SB/1	Correspondence	orrespondence (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.	ation form e of a Customer	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND	RESIDENCE DATA TO E	BE PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless recordation as set forth in	s an assignee is identified be 37 CFR 3.11. Completion	elow, no assignee of of this form is NOT	data will app Ta substitute	ear on the patent. If an assig for filing an assignment.	nee is identified below, the	document has been filed for	
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Analog Devi	ces, Inc.		Norv	vood, Massachuse	etts		
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☐ Issue Fee ☐ Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed. Payment by credit card. Form PTO-2038 is attached.				
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5. Change in Entity Status	(from status indicated above				(onoroso an oxua	opy of any loring.	
_ ~ ~ .	MALL ENTITY status. See	•	☐ b. Applica	ant is no longer claiming SMA	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).	
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Authorized Signature	Matthews Le	nu		Date	2/28/04	,	
Typed or printed name	Matthew E. Co	nnors		Registration	_{n No.} 33,298		

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